

**Unique ID**  
**SCHOOL NAME**  
**Survey Wave**

**OMB #.: 1850-0761**  
**Expiration date: 02/28/2007**

IF ABOVE INFORMATION IS INCORRECT,  
PLEASE MAKE CORRECTIONS DIRECTLY ON LABEL

**PRINCIPAL QUESTIONNAIRE**  
**2003-2004 SCHOOL YEAR**



Prepared for the U.S. Department of Education  
National Center for Education Statistics

By Abt Associates Inc.  
55 Wheeler Street, Cambridge, MA 02138  
1-888-743-7324

**Assurance of Confidentiality**

This survey is authorized by Title I, Part E, Sections 151(b) and 153(a) of Public Law 107-279, the Education Sciences Reform Act of 2002. Participation is voluntary. Your responses are protected from disclosure by federal statute (P.L. 107-279, Title I, Part E, Sec. 183). All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed or used for any other purposes, unless otherwise compelled by law. Your cooperation is essential to make the results of this survey comprehensive, accurate, and timely. The information you provide will be combined with the information provided by others in statistical reports. No individual data that links your name, address, or telephone number with your responses will be included in the statistical reports.

**PLEASE RESPOND BY:** **MARCH 19, 2004**

## SURVEY INSTRUCTIONS:

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- For most questions, please mark the box that best reflects your school's circumstances. Please mark your response with an 'x'.
- For questions that ask for counts or percents, please use zeros where appropriate, rather than leaving the item blank.
- There are two items (5 and 26) for which we would prefer that you provide estimates. It is not necessary to consult any records.
- Definitions are available (on page iii) for many terms. Defined terms will be highlighted with red text throughout the survey.
- Some questions refer to the 2003-04 school year. Please report for the school year to date.

Please have this questionnaire filled out by the person most knowledgeable about this topic. Please keep a copy of the completed questionnaire for your records.

### Please provide the following information:

Name of person completing form:	_____
Telephone:	_____
Title/position	_____
Number of years at this school:	_____
Best days and times to reach you (in case of questions):	_____
E-mail:	_____

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If you have any questions about this questionnaire, please contact us at: **1-888-743-7324**.

### RETURN YOUR COMPLETED QUESTIONNAIRE TO:

Abt Associates Inc.  
Attn: School Survey on Crime and Safety  
55 Wheeler Street Cambridge, MA 02138

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0761. Public reporting burden for this collection of information is estimated to average 60 minutes, including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. If you have any comments concerning the accuracy of the time estimate or suggestions for improving the survey instrument, please write to: U.S. Department of Education, Washington, D.C. 20202-4651. If you have comments or concerns regarding the status of your individual response to this survey, write directly to: National Center for Education Statistics, 1990 K Street, N.W., Room 9017, Washington, D.C. 20006.

# Definitions

The following words are highlighted in **red text** wherever they appear in the questionnaire.  
Please use these definitions as you respond.

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**At school / at your school** — include activities happening in school buildings, on school grounds, on school buses, and at places that are holding school-sponsored events or activities. Unless otherwise specified, only respond for those times that were normal school hours or school activities/events were in session.

**Cult or extremist group** — a group that espouses radical beliefs and practices, which may include a religious component, that are widely seen as threatening the basic values and cultural norms of society at large.

**Firearm/explosive device** — any weapon that is designed to (or may readily be converted to) expel a projectile by the action of an explosive. This includes guns, bombs, grenades, mines, rockets, missiles, pipe bombs, or similar devices designed to explode and capable of causing bodily harm or property damage.

**Gang** — an ongoing loosely organized association of three or more persons, whether formal or informal, that has a common name, signs, symbols or colors, whose members engage, either individually or collectively, in violent or other forms of illegal behavior.

**Hate crime** — a criminal offense or threat against a person, property, or society that is motivated, in whole or in part, by the offender's bias against a race, color, national origin, ethnicity, gender, religion, disability, or sexual orientation.

**Insubordination** — a deliberate and inexcusable defiance of or refusal to obey a school rule, authority, or a reasonable order. It includes but is not limited to direct defiance of school authority, failure to attend assigned detention or on-campus supervision, failure to respond to a call slip, and physical or verbal intimidation/abuse.

**Physical attack or fight** — an actual and intentional touching or striking of another person against his or her will, or the intentional causing of bodily harm to an individual.

**Rape** — forced sexual intercourse (vaginal, anal, or oral penetration). Includes penetration from a foreign object.

**Robbery** — the taking or attempting to take anything of value that is owned by another person or organization, under confrontational circumstances by force or threat of force or violence and/or by putting the victim in fear. A key difference between robbery and theft/larceny is that robbery involves a threat or battery.

**School Resource Officers** — career law enforcement officers with arrest authority, who are assigned to work in collaboration with school organizations.

**Sexual battery** — an incident that includes threatened rape, fondling, indecent liberties, child molestation, or sodomy. Classification of these incidents should take into consideration the age and developmentally appropriate behavior of the offender(s).

**Sexual harassment** — unsolicited, offensive behavior that inappropriately asserts sexuality over another person. The behavior may be verbal or non-verbal.

**Special education student** — a child with a disability, defined as mental retardation, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities, and who needs special education and related services and receives these under the Individuals with Disabilities Education Act (IDEA).

**Specialized school** — a school that is specifically for students who were referred for disciplinary reasons. The school may also have students who were referred for other reasons. The school may be at the same location as your school.

**Theft/larceny (taking things over \$10 without personal confrontation)** — the unlawful taking of another person's property without personal confrontation, threat, violence, or bodily harm. Included are pocket picking, stealing purse or backpack (if left unattended or no force was used to take it from owner), theft from a building, theft from a motor vehicle or motor vehicle parts or accessories, theft of bicycles, theft from vending machines, and all other types of thefts.

**Vandalism** — the willful damage or destruction of school property including bombing, arson, graffiti, and other acts that cause property damage. Includes damage caused by computer hacking.

**Violence** — actual, attempted, or threatened fight or assault.

**Weapon** — any instrument or object used with the intent to threaten, injure, or kill. Includes look-alikes if they are used to threaten others

## **School practices and programs**

- 1. During the 2003-2004 school year, was it a practice of your school to do the following?** (If your school changed its practices during the school year, please answer regarding your most recent practice. Check one response on each line.)

	YES	NO
a. Require visitors to sign or check in	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Control access to school buildings during school hours (e.g., locked or monitored doors)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Control access to school grounds during school hours (e.g., locked or monitored gates)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Require students to pass through metal detectors each day	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Require visitors to pass through metal detectors	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Perform one or more random metal detector checks on students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. Close the campus for most students during lunch	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
h. Use one or more random dog sniffs to check for drugs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
i. Perform one or more random sweeps for contraband (e.g., drugs or <b>weapons</b> ), but not including dog sniffs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
j. Require drug testing for any students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
k. Require drug testing for athletes	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
l. Require drug testing for students in extra-curricular activities other than athletics	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
m. Require students to wear uniforms	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
n. Enforce a strict dress code	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
o. Provide school lockers to students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
p. Require clear book bags or ban book bags on school grounds	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
q. Require students to wear badges or picture IDs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
r. Require faculty and staff to wear badges or picture IDs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
s. Use one or more security cameras to monitor the school	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
t. Provide telephones in most classrooms	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
u. Provide two-way radios to any staff	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
v. Prohibit all tobacco use on school grounds	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**2. Does your school have a written plan that describes procedures to be performed in the following crises? If yes, has your school drilled students on the use of this plan this school year?**

(In each row, please check whether you have a written plan. For every “Yes” answer, check whether your school has drilled students on the plan this year.)

	Have a written plan?		If “ <u>Yes</u> ,” has your school drilled students on the plan this school year?	
	YES	NO	YES	NO
a. Shootings	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Natural disasters (e.g., earthquakes or tornadoes)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Hostages	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Bomb threats or incidents	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Chemical, biological or radiological threats or incidents (e.g., release of mustard gas, anthrax, smallpox or radioactive materials)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**3. During the 2003-2004 school year, did your school have any formal programs intended to prevent or reduce **violence** that included the following components for students? If a program has multiple components, answer “yes” for each that applies. (Check one response on each line.)**

	YES	NO
a. Prevention curriculum, instruction, or training for students (e.g., social skills training)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Behavioral or behavior modification intervention for students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Counseling, social work, psychological, or therapeutic activity for students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Individual attention/mentoring/tutoring/coaching of students by students or adults	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Recreational, enrichment, or leisure activities for students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Student involvement in resolving student conduct problems (e.g., conflict resolution or peer mediation, student court)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. Programs to promote sense of community/social integration among students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
h. Hotline/tipline for students to report problems	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

## **Parent and community involvement at school**

**4. Which of the following does your school do to involve or help parents?** (Check one response on each line.)

	YES	NO
a. Have a formal process to obtain parent input on policies related to school crime and discipline	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Provide training or technical assistance to parents in dealing with students' problem behavior	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Have a program that involves parents <b>at school</b> helping to maintain school discipline	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**5. What is your best estimate of the percentage of students who had at least one parent or guardian participating in the following events during the 2003-2004 school year?**  
(Check one response on each line.)

	0-25%	26-50%	51-75%	76-100%	School does not offer
a. Open house or back-to-school night	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
b. Regularly scheduled parent-teacher conferences	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
c. Special subject-area events (e.g., science fair, concerts)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
d. Volunteered <b>at school</b> or served on a committee	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

**6. Were any of the following community and outside groups involved in your school's efforts to promote safe, disciplined, and drug-free schools?** (Check one response on each line.)

	YES	NO
a. Parents groups	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Social service agencies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Juvenile justice agencies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Law enforcement agencies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Mental health agencies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Civic organizations/service clubs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. Private corporations and business	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
h. Religious organizations	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

7. During the 2003-2004 school year, did you have any sworn law enforcement officers, security guards, or security personnel present **at your school** on a regular basis?

☐<sub>1</sub> Yes

☐<sub>2</sub> No [SKIP to Question 12]

8. Were these sworn law enforcement officers, security guards, or security personnel regularly used in or around your school at the following times? (Check one response on each line.)

	YES	NO
a. At any time during school hours	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. While students were arriving or leaving	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. At selected school activities (e.g., athletic and social events, open houses, science fairs)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. When school/school activities not occurring	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Other (please specify) _____		

9. How many of the following types of sworn law enforcement officers, security guards, or security personnel did you regularly have present in your school? (If an officer works full-time across various schools in the district, please count this as 'part-time' for this school.)

	When you have no such officer or guard, please record zero [0].	
	Number of full-time at your school	Number of part-time at your school
a. Security guards or security personnel (not law enforcement)	_____	_____
b. <b>School Resource Officers</b> (Include all career law enforcement officers with arrest authority, who are assigned to work in collaboration with school organizations.)	_____	_____
c. Sworn law enforcement officers who are <u>not</u> <b>School Resource Officers</b>	_____	_____

10. Did any of the law enforcement officers, security guards, or security personnel **at your school** routinely wear a uniform (or other identifiable clothing) or carry a firearm during the times they were **at your school**? (Check one response on each line.)

	YES	NO
a. Uniformed, or in other identifiable clothing	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Armed with a firearm	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**11. Did these sworn law enforcement officers, security guards, or security personnel participate in the following activities **at your school**? (Check one response on each line.)**

	YES	NO
a. Security enforcement and patrol	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Maintaining school discipline and safety	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Coordination with local police and emergency team	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Identifying problems in the school and proactively seeking solutions to those problems	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Training teachers and staff in school safety or crime prevention	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Mentoring students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. Teaching a law-related education course or training students (e.g., drug-related education, criminal law or crime prevention courses)	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

### **Teacher training**

**12. During the 2003-2004 school year, which of the following trainings for classroom teachers or aides did your school or district provide? (Check one response on each line.)**

	YES	NO
a. Classroom management for teachers	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. School-wide discipline policies and practices related to <b>violence</b> , alcohol and/or drug use	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Safety procedures	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Recognizing early warning signs of students likely to exhibit <b>violent</b> behavior	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Recognizing signs of students using/abusing alcohol and/or drugs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Positive behavioral intervention strategies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**13. How many classroom teachers or aides participated in at least one of the training sessions listed in question 12? Please consider only classroom teachers or aides, and not administrators or counselors. (Record zero [0] if you answered “No” to all of the items in question 12.)**

Number of classroom teachers or aides involved in training \_\_\_\_\_



## **Limitations on crime prevention**

**14. To what extent did the following factors limit your school's efforts to reduce or prevent crime?**

(Check one response on each line.)

	Limit in major way	Limit in minor way	Does not limit
a. Lack of or inadequate teacher training in classroom management	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
b. Lack of or inadequate alternative placements/programs for disruptive students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
c. Likelihood of complaints from parents	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
d. Lack of teacher support for school policies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
e. Lack of parental support for school policies	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
f. Teachers' fear of student retaliation	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
g. Fear of litigation	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
h. Inadequate funds	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
i. Inconsistent application of school policies by faculty or staff	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
j. Fear of district or state reprisal	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
k. Federal, state, or district policies on disciplining <b>special education students</b>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
l. Other federal policies on discipline and safety	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>
m. Other state or district policies on discipline and safety	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>

## **Frequency of crime and violence at school**

**15. During the 2003-2004 school year, did any of your school's students, faculty, or staff die as a result of a homicide committed **at your school**?** (Check one response.)

☐<sub>1</sub> Yes

☐<sub>2</sub> No

**16. During the 2003-2004 school year, has there been at least one incident **at your school** that involved a shooting (whether or not anyone was hurt)? Please include those incidents that occurred **at school**, whether or not a student or non-student used the **firearm**.** (Check one response.)

☐<sub>1</sub> Yes

☐<sub>2</sub> No

## Number of incidents

17. Please provide the number of *incidents* your school recorded during the 2003-2004 school year for the offenses listed below. Please provide information on:

- The number of incidents, not the number of victims or offenders.
- Recorded incidents, regardless of whether any disciplinary action was taken.
- Recorded incidents, regardless of whether students or non-students were involved.
- Incidents occurring before, during, or after normal school hours.
- Only the most serious offense when an incident involved multiple offenses. For example, if an incident included a **rape** and **robbery**, include the incident only under **rape**. The list below does not necessarily dictate the order of seriousness. Use your own judgment when determining which is the most serious offense.

	If there were no such incidents in your school's records, please record zero [0].	
	Total number of recorded incidents	Number reported to police or other law enforcement
a. <b>Rape</b> or attempted <b>rape</b>	_____	_____
b. <b>Sexual battery</b> other than <b>rape</b> (include threatened <b>rape</b> )	_____	_____
c. <b>Robbery</b> (taking things by force)		
i. With a <b>weapon</b>	_____	_____
ii. Without a <b>weapon</b>	_____	_____
d. <b>Physical attack or fight</b>		
i. With a <b>weapon</b>	_____	_____
ii. Without a <b>weapon</b>	_____	_____
e. Threats of <b>physical attack</b>		
i. With a <b>weapon</b>	_____	_____
ii. Without a <b>weapon</b>	_____	_____
f. <b>Theft/larceny</b> (taking things over \$10 without personal confrontation)	_____	_____
g. Possession of <b>firearm/explosive device</b>	_____	_____
h. Possession of knife or sharp object with intent to harm	_____	_____
i. Distribution of illegal drugs	_____	_____
j. Possession or use of alcohol or illegal drugs	_____	_____
k. <b>Vandalism</b>	_____	_____

18. During the 2003-2004 school year, how many of the following occurred? (If no such incident occurred, please record zero [0]).

	Total number
a. Hate crime	_____
b. Gang-related crime	_____

19. How many times during the 2003-2004 school year were activities disrupted by actions such as death threats, bomb threats, or chemical, biological, or radiological threats? Exclude all fire alarms from your response, including false fire alarms. (If no such incident occurred, please record zero [0].)

Number of disruptions \_\_\_\_\_

### Disciplinary problems and actions

20. To the best of your knowledge, how often did the following types of problems occur **at your school**? (Check one response on each line.)

	Happens daily	Happens at least once a week	Happens at least once a month	Happens on occasion	Never happens
a. Student racial tensions	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
b. Student bullying	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
c. Student sexual harassment of other students	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
d. Student verbal abuse of teachers	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
e. Widespread disorder in classrooms	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
f. Student acts of disrespect for teachers	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
g. Gang activities	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>
h. Cult or extremist group activities	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>

**21. During the 2003-2004 school year, did your school allow for the use of the following disciplinary actions?**  
**If yes, were the actions used this school year?** (In each row, please check whether your school allows for each action. For every “Yes” answer, please check whether the action was used for this year.)

Disciplinary Action	Does your school allow for use of the following?		If “ <u>Yes</u> ,” was the action used this school year?	
	YES	NO	YES	NO
a. Removal with no continuing school services for at least remainder of school year	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
b. Removal with school-provided tutoring/at-home instruction for at least remainder of school year	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
c. Transfer to <b>specialized school</b> for disciplinary reasons	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
d. Transfer to another regular school for disciplinary reasons	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
e. Out-of-school suspension or removal for less than the remainder of the school year with no curriculum/services provided	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
f. Out-of-school suspension or removal for less than the remainder of the school year with curriculum/services provided	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
g. In school suspension for less than the remainder of the school year with no curriculum/services provided	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
h. In school suspension for less than the remainder of the school year with curriculum/services provided	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
i. Referral to school counselor	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
j. Assigned to program designed to reduce disciplinary problems during school hours	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
k. Assigned to program designed to reduce disciplinary problems outside of school hours	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
l. Kept off school bus due to misbehavior	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
m. Corporal punishment	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
n. Put on school probation with threatened consequences if another incident occurs	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
o. Detention and/or Saturday school	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
p. Loss of student privileges	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>
q. Require participation in community service	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>

**22. During the 2003-2004 school year, how many students were involved in committing the following offenses, and how many of the following disciplinary actions were taken in response?**

- If more than one student was involved in an incident, please count each student separately when providing the number of disciplinary actions.
- If a student was disciplined more than once, please count each offense separately (e.g., a student who was suspended five times would be counted as five suspensions).
- However, if a student was disciplined in two different ways for a single infraction (e.g., the student was both suspended and referred to counseling), count only the most severe disciplinary action that was taken.

*If there are no such offenses or disciplinary actions in your school's records, please record zero [0].*

Offense	Total students involved in recorded offenses (regardless of disciplinary action)	Removals with no continuing school services for at least the remainder of the school year	Transfers to <b>specialized schools</b> for disciplinary reasons	Out-of-school suspensions lasting 5 or more days, but less than the remainder of the school year	Other disciplinary action (e.g., suspension less than 5 days, detention, etc.)
a. Use/possession of a <b>firearm/explosive device</b>	_____	_____	_____	_____	_____
b. Use/possession of a <b>weapon</b> other than a <b>firearm</b>	_____	_____	_____	_____	_____
c. Distribution, possession, or use of illegal drugs	_____	_____	_____	_____	_____
d. Distribution, possession, or use of alcohol	_____	_____	_____	_____	_____
e. <b>Physical attacks or fights</b>	_____	_____	_____	_____	_____
f. <b>Insubordination</b>	_____	_____	_____	_____	_____

**23. During the 2003-2004 school year, how many students were removed from your school without continuing services for at least the remainder of the school year or transferred to a **specialized school** for disciplinary reasons? (If no such removals or transfers occurred, please record zero [0].)**

	Total number
a. Total removals with no continuing services for at least the remainder of the school year?	_____
b. Total transfers to <b>specialized schools</b> for disciplinary reasons?	_____

## **School characteristics**

**24. As of October 1, 2003, what was the total enrollment **at your school**?**

\_\_\_\_\_ students

**25. What percentage of your current students fit the following criteria?**

	Percent of students
a. Eligible for free or reduced-price lunch	_____ %
b. Limited English proficient (LEP)	_____ %
c. <b>Special education students</b>	_____ %
d. Male	_____ %

**26. What is your best estimate of the percentage of your current students who are the following?**

	Percent of students
a. Below the 15 <sup>th</sup> percentile on standardized tests	_____ %
b. Likely to go to college after high school	_____ %
c. Consider academic achievement to be very important	_____ %

**27. How many classroom changes do most students make in a typical day?**

(Count going to lunch and then returning to the same or a different classroom as two classroom changes. Do not count morning arrival or afternoon departure.)

Typical number of classroom changes \_\_\_\_\_

**28. How many paid staff are **at your school** in the following categories? (If no such staff, please record zero [0].)**

	Number of full-time	Number of part-time
a. Special education teachers	_____	_____
b. Special education aides	_____	_____
c. Regular classroom teachers	_____	_____
d. Regular classroom teacher aides or paraprofessionals	_____	_____
e. Counselors/mental health professionals	_____	_____

**29. How would you describe the crime level in the area(s) in which your students live?**

(Check only one response.)

- ☐<sub>1</sub> High level of crime  
☐<sub>2</sub> Moderate level of crime  
☐<sub>3</sub> Low level of crime  
☐<sub>4</sub> Students come from areas with very different levels of crime

**30. How would you describe the crime level in the area where your school is located?**

(Check only one response.)

- ☐<sub>1</sub> High level of crime  
☐<sub>2</sub> Moderate level of crime  
☐<sub>3</sub> Low level of crime

**31. Which of the following best describes your school? (Check one response.)**

- ☐<sub>1</sub> Regular public school  
☐<sub>2</sub> Charter school  
☐<sub>3</sub> Have magnet program for part of school  
☐<sub>4</sub> Totally a magnet school  
☐<sub>5</sub> Other (please specify): \_\_\_\_\_

**32. What is your school's average daily attendance?**

\_\_\_\_\_ % of students present

**33. During the 2003-2004 school year, how many students transferred to or from your school after the school year had started? Please report on the total mobility, not just transfers due to disciplinary actions. (If a student transferred more than once in the school year, count each transfer separately. If no transfers, please record zero [0].)**

	Total number of transfers
a. Transferred <u>to</u> the school	_____
b. Transferred <u>from</u> the school	_____

**34. Please provide the following dates.**

a. Starting date for your 2003-2004 academic school year	____/____/2003
b. Ending date for your 2003-2004 academic school year	____/____/2004
c. Date you completed the questionnaire	____/____/2004

**Thank you very much for completing this survey. If you have any questions, please contact us, toll-free at: 1-888-743-7324.**